

State of Washington Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology	Use
Fee Paid	0
	11 -00
Date 7-	80

Section 1. APPL	ICANT - PERSO	ON, ORGA	INIZAL	TOTAL OTT AN		71.37	
Name (GLENN	Gustafson)		Home Tel: (<u>5</u> 6	9)54	5-54	186
Mailing Address 1008	Rd 36 R.R. 1	SN		Work Tel: ()		
City Paseo	State Wa	Zip+4 <u>9930</u>	<u> </u>	FAX: ()		
	/						
Section 2. CONT Same as above		TO CALI	L ABOU	OT THE AP	PLICAT	rion	
Name				Home Tel: ()		
Mailing Address				Work Tel: ()		
City	State	Zip+4	+ _	FAX: ()		
Relationship to applican	t						
Section 3. STAT	permit to use not mor) from a \(\sime\) surface wa	re than	35c	water source (che	_ (galleck only o	ons per min	oute or purpose(s)
DESCRIPTION OF T	HE PLACE OF USE.						
inflicient. of 243	nual quantity to be use	ed in acre-foot	per vear	80 18	40 00	plano (le un l.
Estimate a maximum an Check if the wate	ly Lown, gacken	Upul-41	norths	year, th	e hes	bis	Jan S
Check if the water	r use is proposed for a		oject. Indic	cate the period of	time that	the water w	ill be needed:
From	_/ to	//_	rise 1				
From Section 4. WATE		//_	moe I				
	ER SOURCE		nse I	use.			
Section 4. WATE	R ce and indicate if stre, write "unnamed sp	eam, spring,	If GRO	use.			
Section 4. WATE If SURFACE WATE Name the water sourdlake, etc. If unnamed	R ce and indicate if stre, write "unnamed spitc.:	eam, spring,	If GRO	UNDWATER			
If SURFACE WATE. Name the water sour lake, etc. If unnamed "unnamed stream," e	CR SOURCE R ce and indicate if stre, write "unnamed spitc.: s:	eam, spring,	If GRO	UNDWATER			
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Appl. No.:

Sec	tion 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named: private well system
B.	Briefly describe your proposed water system. (See instructions.)
	1/2 horse pump.
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION.
Sec	ction 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION
(Co	ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection House
-	(Homes, Apartment, Recreational, etc.)
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Con	aplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION ompleted for all irrigation and agriculture uses.)
Α.	Total number of acres to be irrigated:
B.	List total number of acres for other specified agricultural uses:
	Use Acres
	Use Acres Use Acres
C.	Use Acres Acres Acres All Total number of acres to be covered by this application: All Acres All Acres Acres All Acres All Acres Acres All Acres Acres All Acres All Acres All Acres Acres Acres All Acres
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.:
E.	Farm uses: Stockwater - Total # of animals Animal Type (If dairy cattle, see below) Dairy - # Milking # Non-milking

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Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?	☐ YES XNO
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or point, and some portion of the storage will be above grade, you must also apply for a reservoir permit reservoir permit application from the Department of Ecology.	nancy and an error introduction of the state
Section 9. DRIVING DIRECTIONS	
Provide detailed driving instructions to the project site.	
N. of Pasco on Glade Rd to Clark Rd (west)
N. of Pasco on Glade Rd to Clark Rd (Imi, South on 36th (left) about I mi do grey house on right side.	run, big
Section 10. REQUIRED MAP	
A. Attach a map of the project. (See instructions.)	
Section 11. PROPERTY OWNERSHIP	
A. Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(es of the owner(s):	
B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:	¥YES □ NO
I certify that the information above is true and accurate to the best of my knowledge. I understant to process my application, I grant staff from the Department of Ecology access to the site for inspection of the above application of the above application of the Department of Ecology, all responsibility for the accuracy of the information responsibility for the accuracy of the information responsibility.	pection and lication by the
Applicant (or authorized representative) Date 9-14-	-99
Glove It Kustoffor 9-14-9	g.
Landowner for place of use (if same as applicant, write "same") Date	

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I have examined this application as required by SEPA and find that it is: I not an "action".

APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason	n(s):				
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128			
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE			
Explanation:					
Please provide the additional information requested above and return your application by(date).					
Ecology staff	Date	<u> </u>			

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

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